

**Perinatal Hepatitis B Prevention Program
Kansas Immunization Program
September 2001**

Preface

Each year, an estimated 20,000 infants are born to women in the United States who are positive for hepatitis B surface antigen (HBsAg). These infants are at high risk for perinatal hepatitis B virus (HBV) infection which can be further compounded into cirrhosis or hepatocellular carcinoma during adulthood.

Since 1992, programs have been implemented in all fifty states to prevent the spread of perinatal HBV infection. Objectives of the Perinatal Hepatitis B Prevention Program are as follows:

1. Ensure that all pregnant women are tested for HBsAg.
2. Ensure that infants born to HBsAg positive women receive hepatitis B immune globulin (HBIG) and hepatitis B vaccine at birth, with follow-up doses of vaccine at one-two months and six months of age.

The state of Kansas has placed into effect an HBsAg perinatal screening law as of July 1, 1995. K.S.A. 65-153f states that all women are to be tested for HBsAg within 14 days of diagnosis of pregnancy. Before the passage of this law, it was estimated that 84% of pregnant women were being tested for HBsAg in Kansas. The passing of this law further reinforces good medical practice of screening pregnant women for HBsAg.

Administration of appropriate immunoprophylaxis to infants born to HBsAg positive is approximately 90% effective in preventing perinatal HBV transmission. Infants who are incompletely vaccinated against hepatitis B are less likely to be protected against infection. It is imperative that all infants born to HBsAg positive women are vaccinated completely, at recommended intervals, to prevent perinatal HBV infection.

Perinatal hepatitis B prevention programs require intensive case management. To be truly successful, HBsAg positive women must be identified early and followed throughout their pregnancy to guarantee appropriate immunoprophylaxis of their infants, sexual and household contacts. Immunoprophylaxis with hepatitis B vaccine further ensures the prevention of infection with HBV. Those sexual and household contacts identified as seropositive must be counseled on the action to take regarding their hepatitis B status.

HBsAg positive pregnant women ***MUST BE REMINDED PRIOR TO ENTERING THE HOSPITAL FOR DELIVERY*** that their infants require HBIG and hepatitis B vaccination at birth. The delivery hospital also needs to be notified to further safeguard the immunoprophylaxis treatment of the neonate. HBsAg positive pregnant women are to be tracked following delivery and reminded to bring their infant in at the appropriate intervals to finish the vaccine series. Infants born to HBsAg positive women must be tested for HBsAg and anti-HBs three to nine months after receiving the last vaccination to monitor the success of the immunoprophylaxis. Concentrated follow-up of HBsAg positive women and their newborns is necessary to achieve these objectives.

Amendment to Kansas Law 65-153f

Each physician or other person attending a pregnant woman in this state during gestation, with the consent of such woman, shall take or cause to be taken a sample of blood of such woman within 14 days after diagnosis of pregnancy is made. Such sample shall be submitted for serological tests which meet the standards recognized by the United States public health service for the detection of syphilis and hepatitis B to a laboratory approved by the secretary of health and environment for such serological tests. Any state, United States public health service, or United States army, navy or air force laboratory or any laboratory approved by the state health agency of the state in which the laboratory is operated shall be considered approved for the purposes of this act. Any laboratory in this state, performing the tests required by this section shall make a report to the secretary of health and environment of all positive or reactive tests on forms provided by the secretary of health and environment and also shall make a report of the test's results to the submitting physician or person attending the woman. Laboratory statements, reports, files and records prepared pursuant to this section shall be confidential and shall not be divulged to or open to inspection by any person other than the state or local health officers or their duly authorized representatives, except by written consent of the woman.